

Figure 1

Process A.1

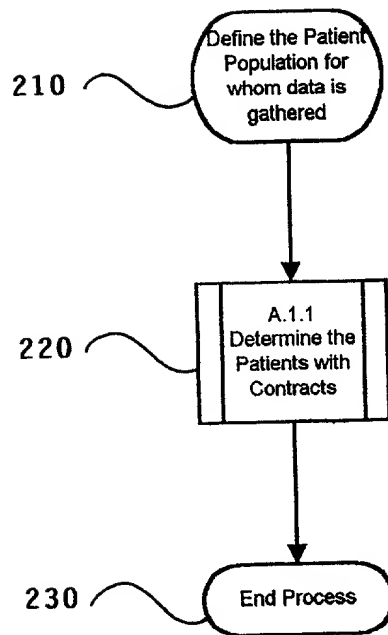


Figure 2

Process A.1.1

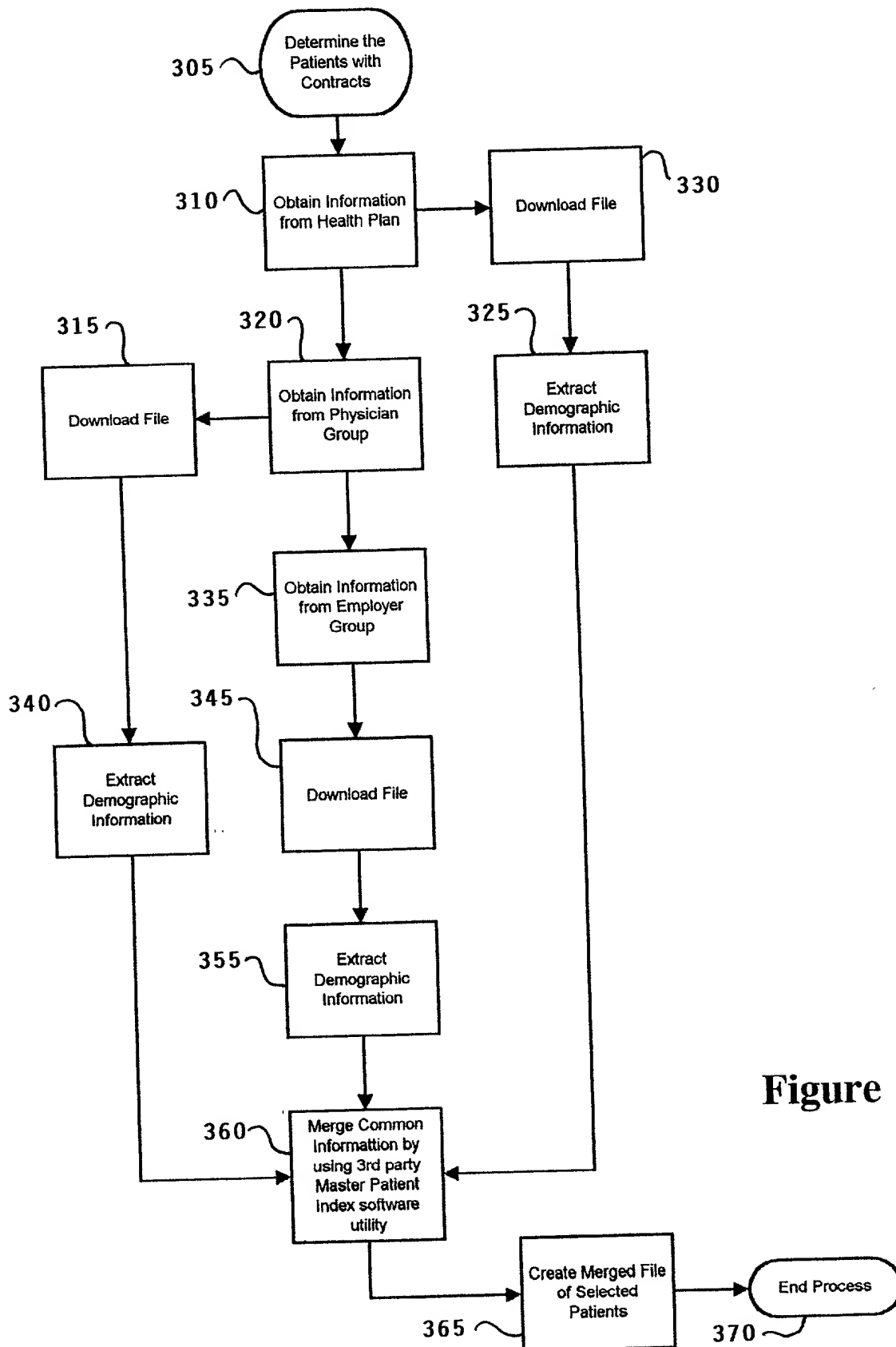


Figure 3

Process A.2

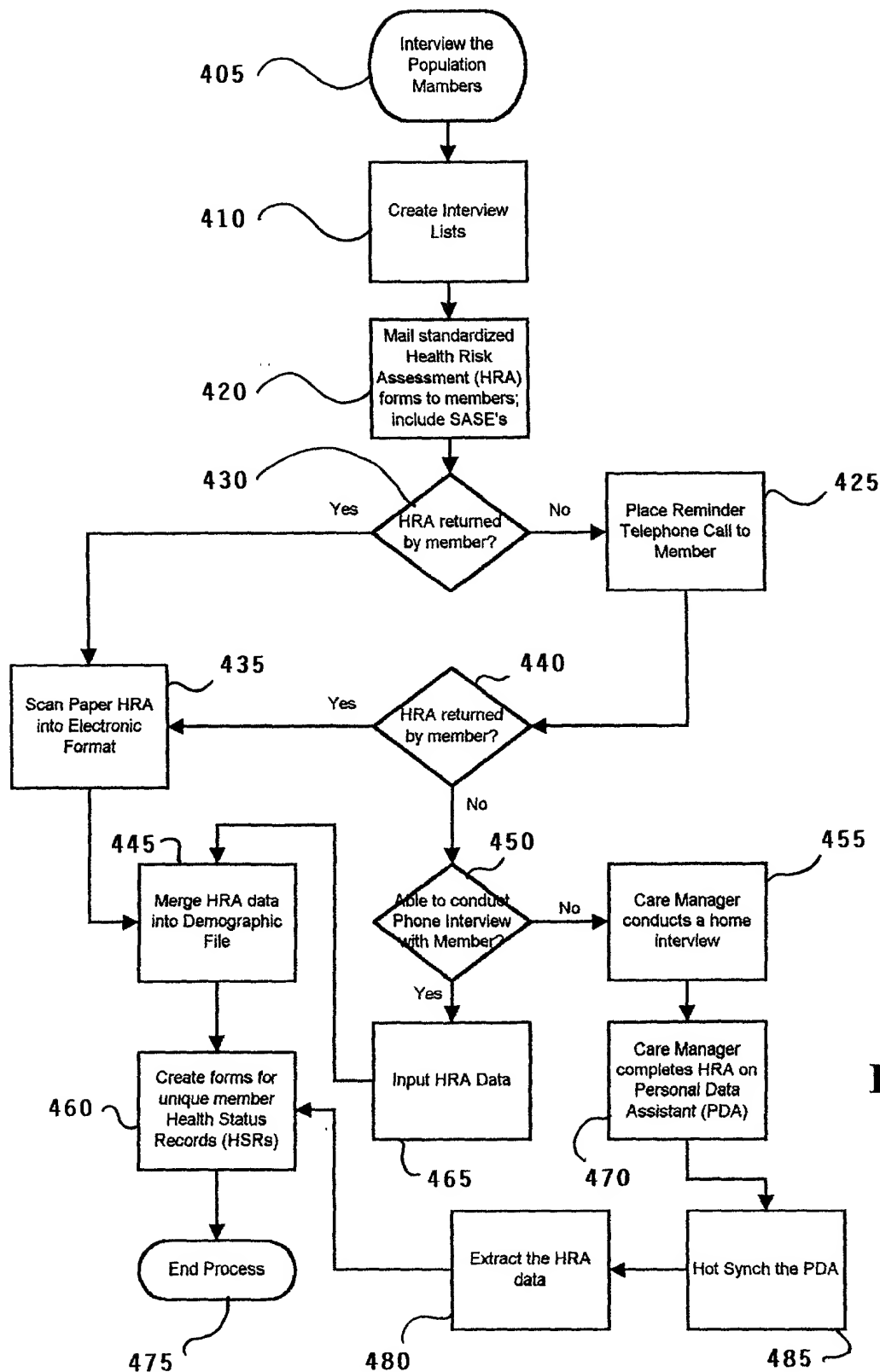


Figure 4

Process A.3

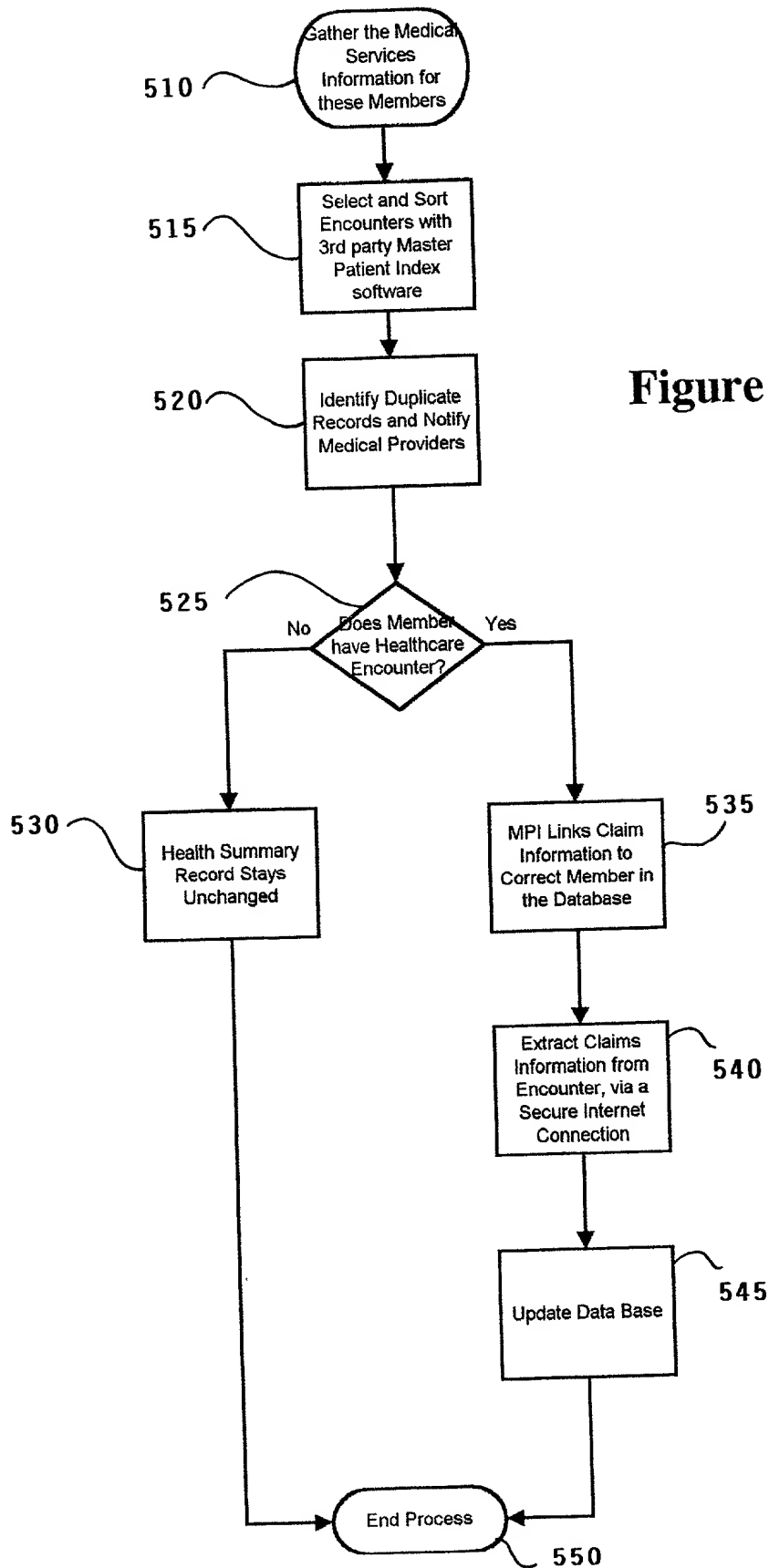


Figure 5

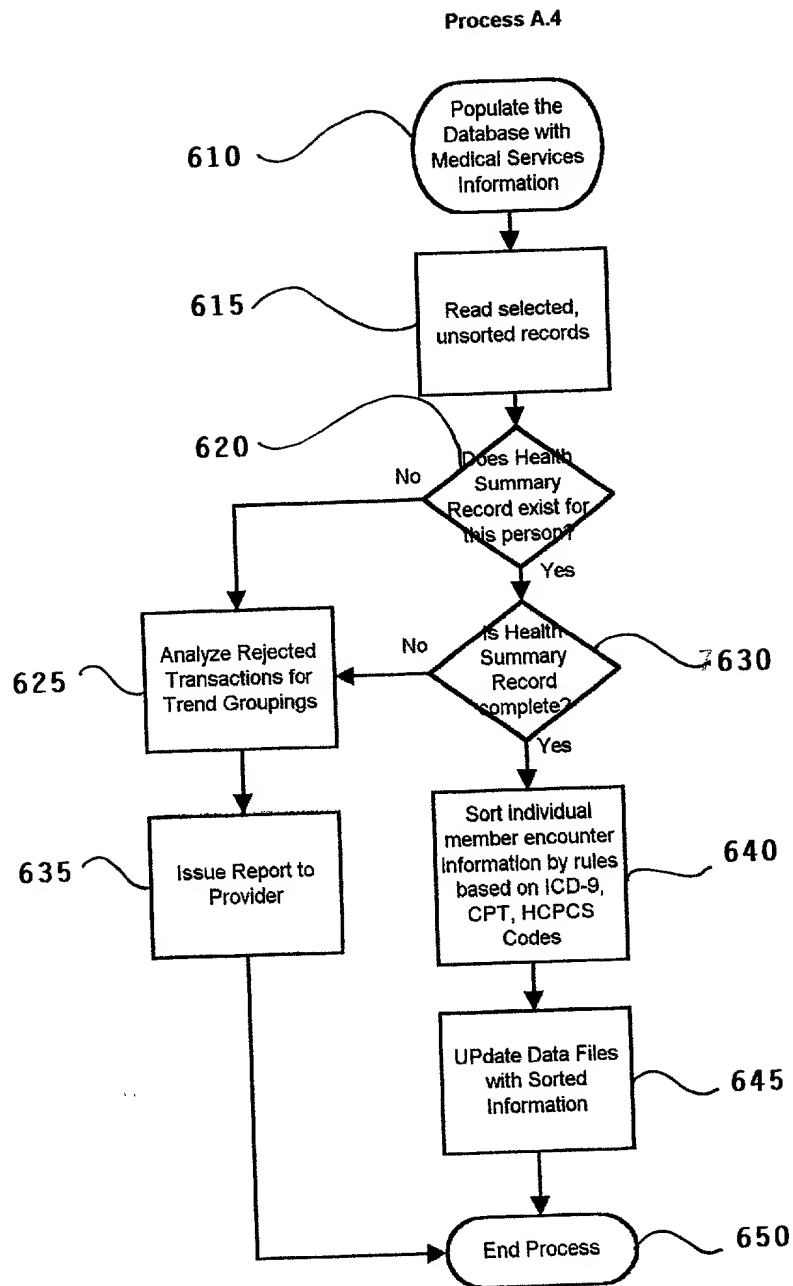


Figure 6

Process A.5

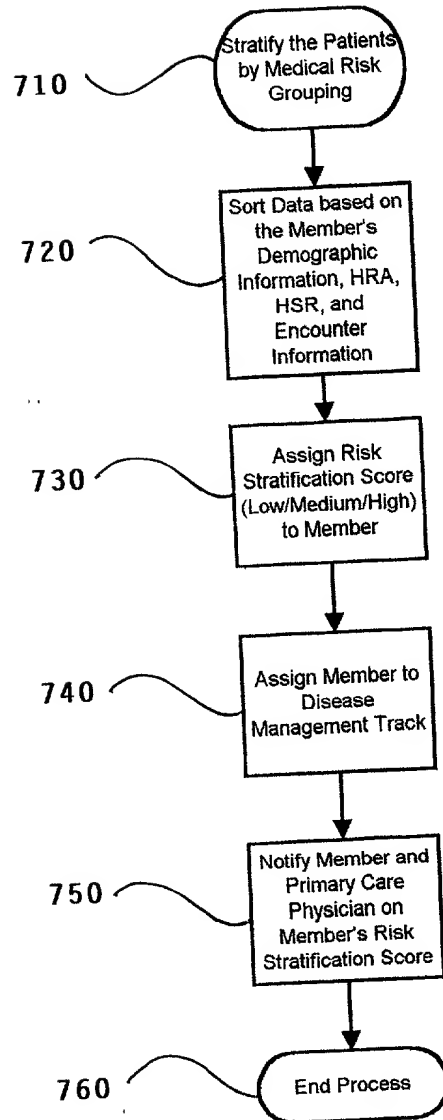


Figure 7

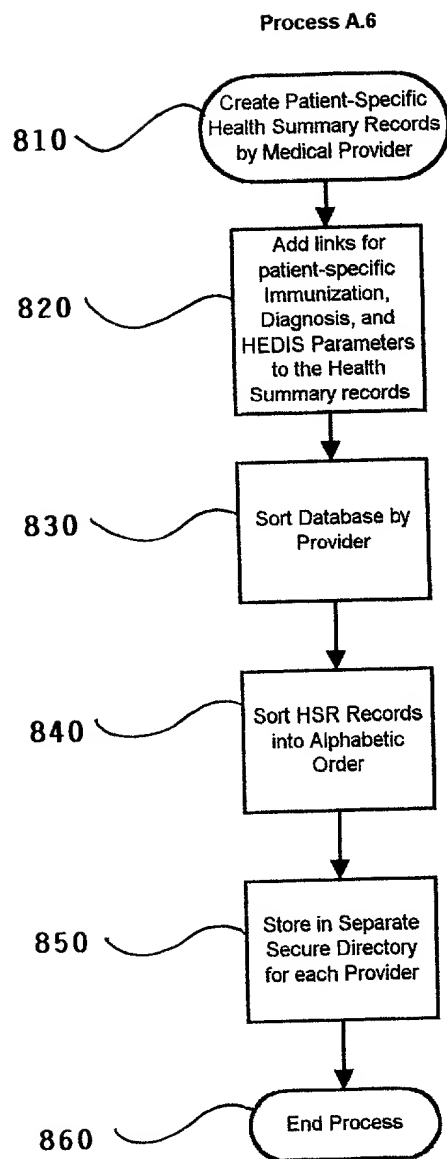


Figure 8

Process A.7

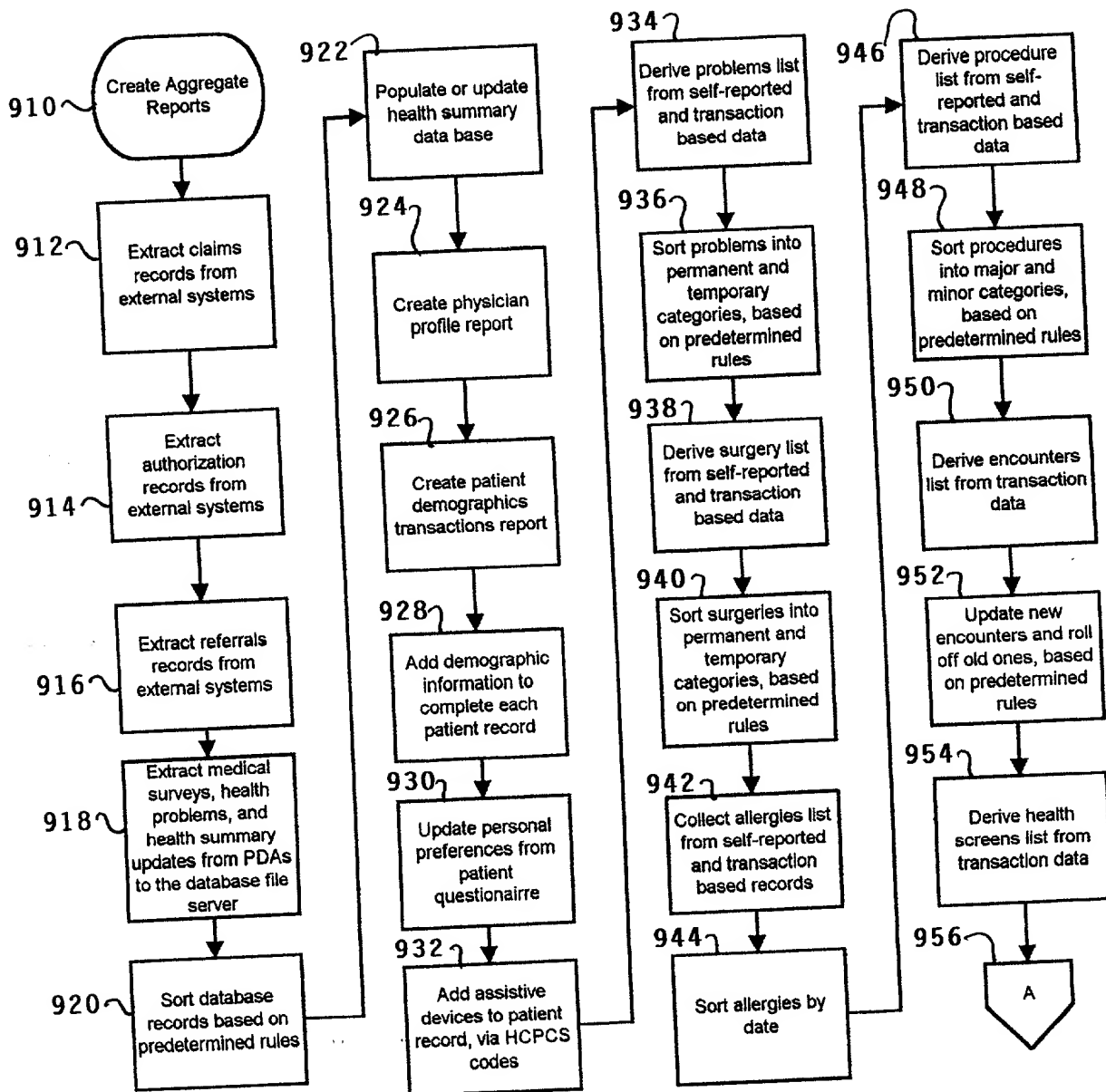


Figure 9

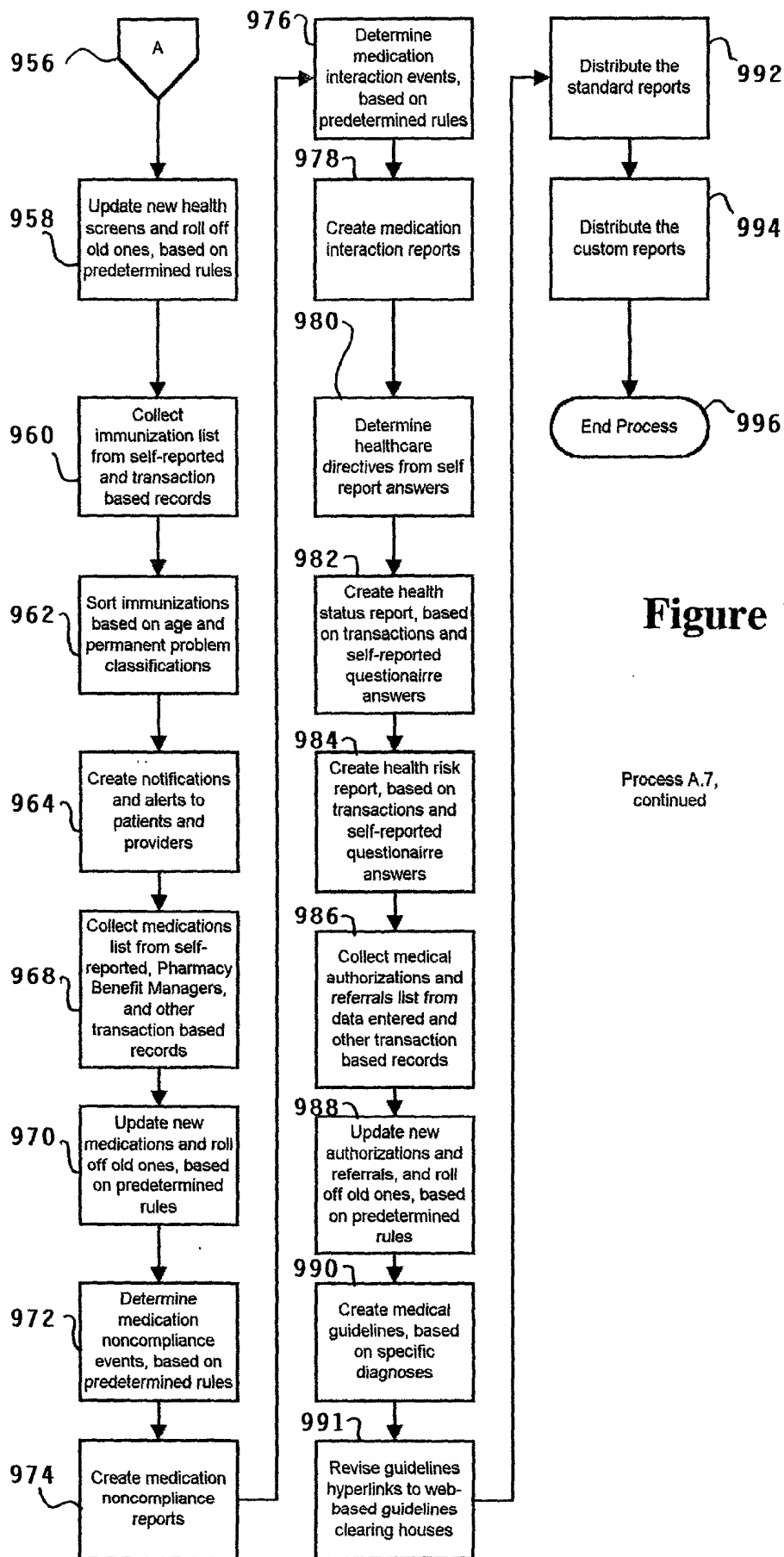


Figure 10

Process A.7,
continued

Process A.8

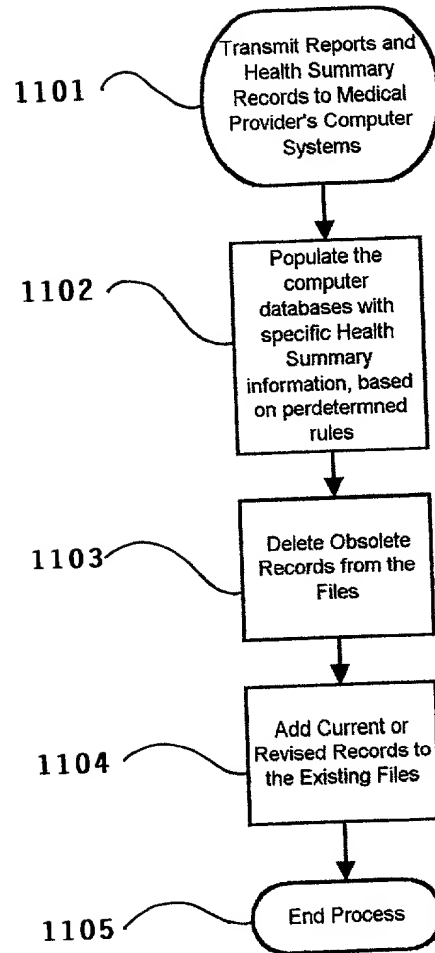


Figure 11

Process A.9

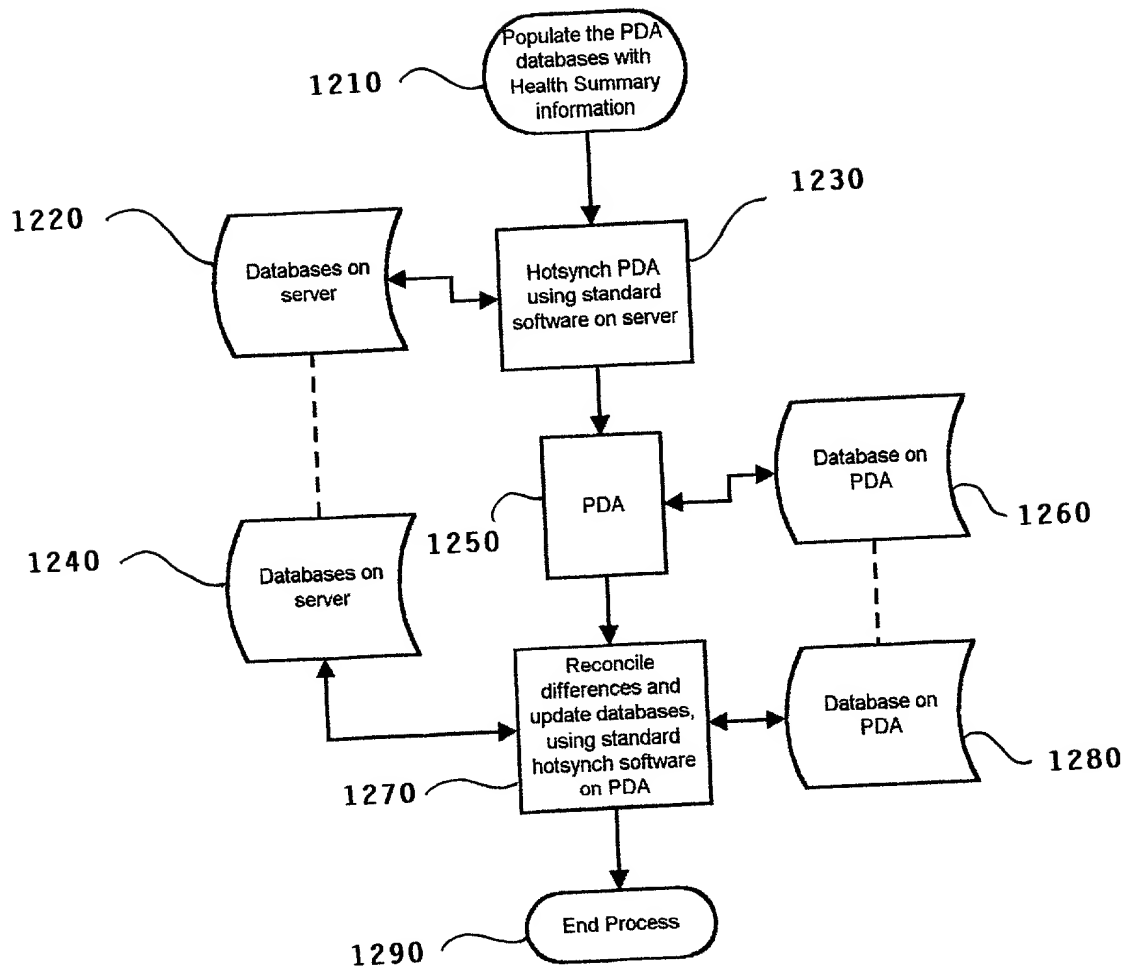


Figure 12

Process A.10

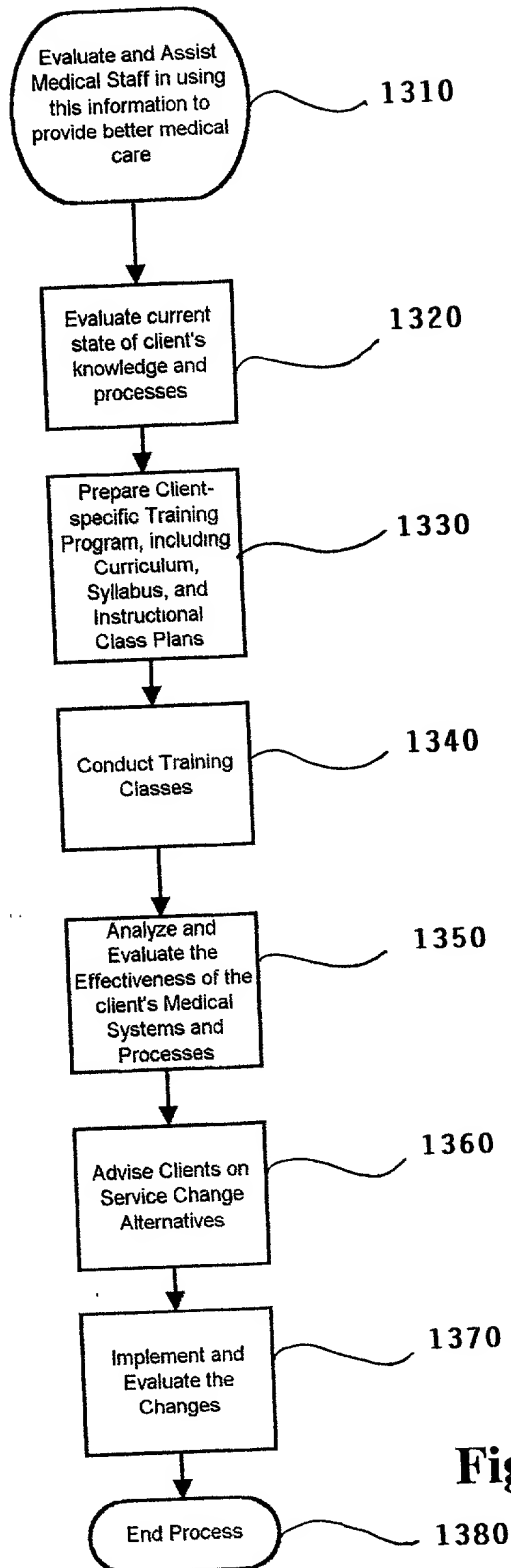


Figure 13

Process A.11

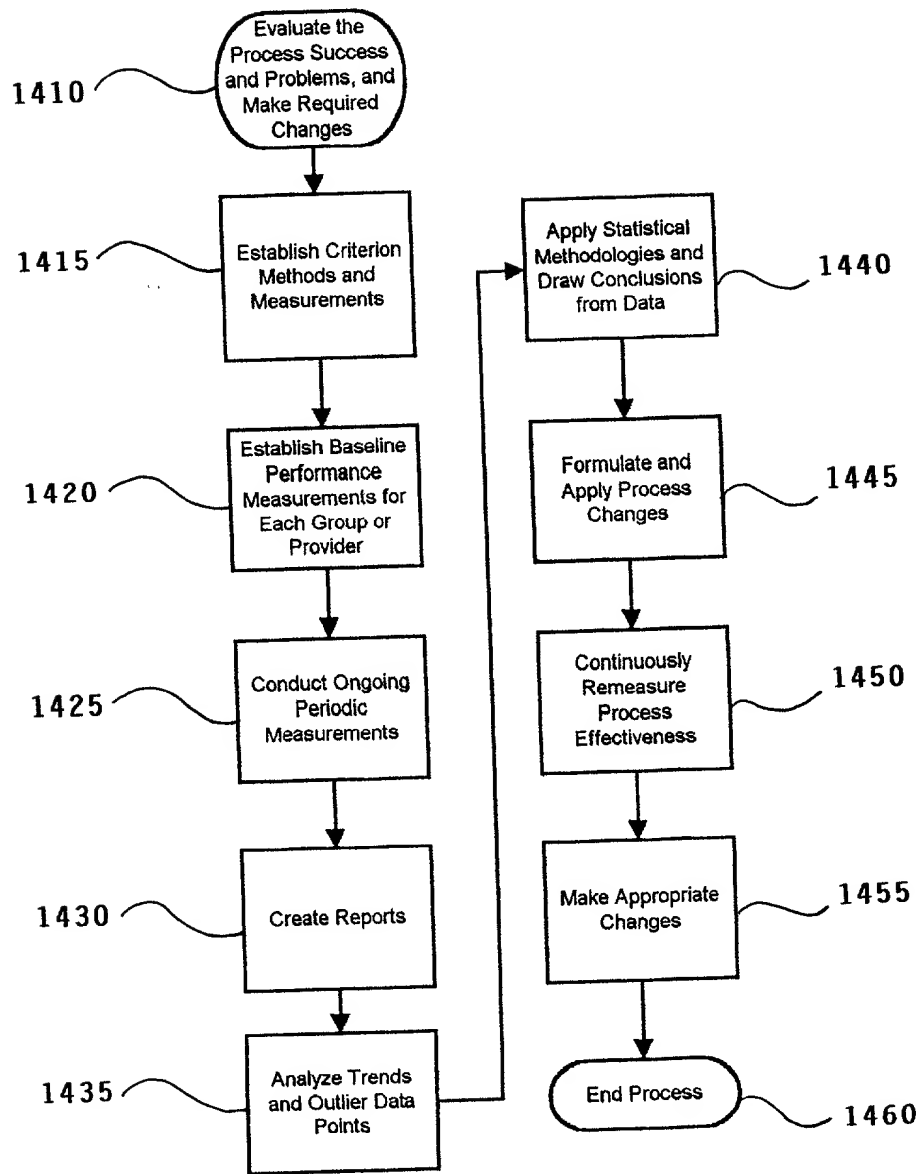


Figure 14

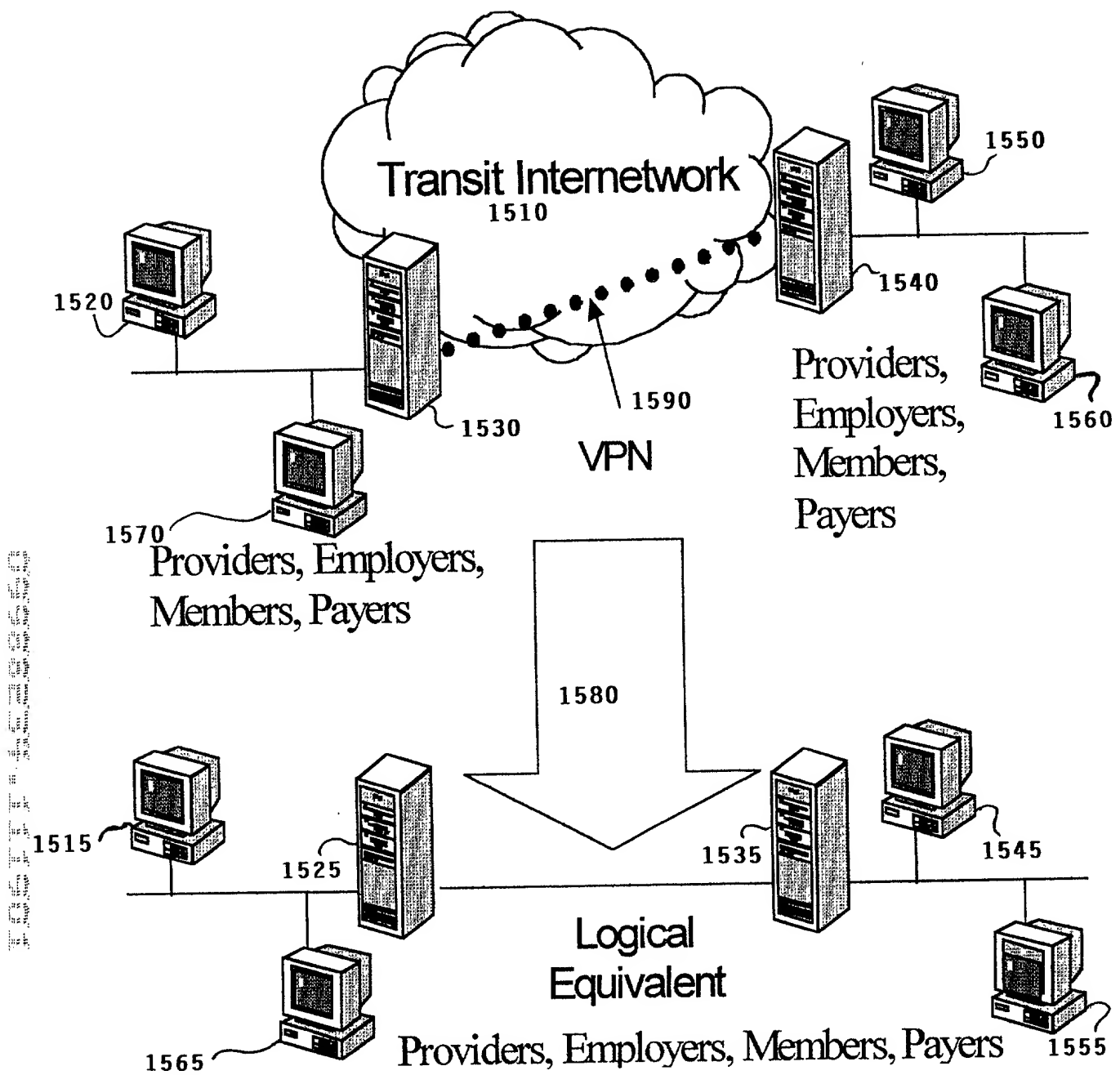
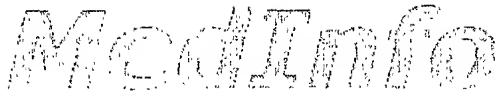


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Physician's View

Welcome, Joe Smith!

What Would You Like To Do?

We have a number of options. You can select these from the left navigation or from the menu below. For interesting links to other locations that might interest you, check out our Interesting Links section to the right. Again, welcome to our application.

Interesting Links:

■ [Read about Diseases](#)

Sincerely,

The TNG Team

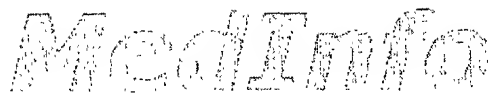
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Last, First	Sex	DOB	SSN	Patient ID
Castro, Gina	F	4/8/1986	410526752	412563
Dan, Steely	M	1/1/1900	321654987	4421155
Day, Kenneth	M	7/30/1972	123456789	12345678
Garron, Steve	M	2/2/1956	987654321	98765432
Garron, Steve	M	2/2/1956	555123456	1010203
Hendricks, Jimmy	M	1/1/1900	123123124	3322111
Himes, Henry	F	1/1/1900	123123123	5551212
Jones, Harry	F	2/2/2045	123123124	3322111
Jones, Janice	F	1/1/1900	123456789	12345678
Jones, Joey	M	1/1/1900	321654987	4421155

Total records: 28 | [Next Records](#) | Viewing records 1- 10

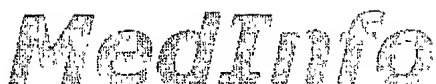
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Marley, Joseph

Health Summary

DOB: 1/1/1900
Preferred Name: Joe
Occupation:
PCP: Smith, Joe

Address	City	State	Zip	Home Phone	Business Phone
123 south street	Sahuarita	CT	98765	123-345-9876	123-123-4567

Problem List

Temporary Problems

Diagnosis	ICD-9 Code	Date Diagnosed
No temporary problems identified to date.		

Permanent Problems

Diagnosis	ICD-9 Code	Date Diagnosed
No permanent problems identified to date...		

Allergies

Substance	Reaction	Date
No Allergies Listed...		

Encounters

Service Date	Diagnosis	Physician	Place Of Service	ClaimID
No Encounters Listed...				

Procedures

Procedure	Code	Date
No Procedures Listed...		

Health Screens

Screen	Last Check	Next Check
No Health Screens Listed...		

Immunizations

Immunization	Immunization Date	Date Due
Tetanus, Pertussis, Diptheria	5/5/1995	5/5/2005

Prescriptions/Meds

Medication	Date Ordered	Date Filled
No Prescriptions Listed...		

Advanced Directives

Directive	Location	Special Instructions	Date Executed
No Advanced Directives Listed ..			

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First Name

Last Name

DOB

Sex

SSN

Subscriber ID

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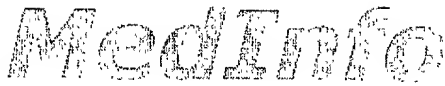
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Patients with Acute bronchitis

Today's Date: 11/2/2001

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Last, First	Sex	DOB	SSN	Patient ID
-------------	-----	-----	-----	------------

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Please choose a drug to build your report:

Drug:

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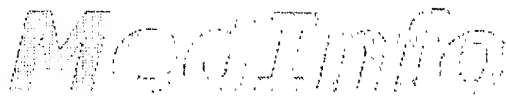
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Glucophage Patients

Today's Date: 11/2/2001

sort » [all](#) [a](#) [b](#) [c](#) [d](#) [e](#) [f](#) [g](#) [h](#) [i](#) [j](#) [k](#) [l](#) [m](#) [n](#) [o](#) [p](#) [q](#) [r](#) [s](#) [t](#) [u](#) [v](#) [w](#) [x](#) [y](#) [z](#)

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Last, First	Sex	DOB	SSN	Patient ID
Garron, Steve	M	2/2/1956	987654321	98765432
Jones, Michael	M	5/12/1960	123456789	12345678

Total records: 2 | Viewing records 1- 2

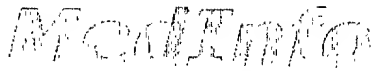
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Jones, Michael

Health Summary

DOB: 5/12/1960
Preferred Name: Mike
Occupation: Dog Catcher
PCP: Smith, Joe

Address	City	State	Zip	Home Phone	Business Phone
1234 Test Street	Test	AZ	45612	(555)555-5555	(555)456-7899

Problem List

Temporary Problems

Diagnosis	ICD-9 Code	Date Diagnosed
Pneumococcal pneumonia [Streptococcus pneumoniae pneumonia]	480.9	2/12/2001
Diabetes with renal manifestations type II [noninsulin dependent type] [NIDDM type] [adult-onset type] or unspecified type, not stated as uncontrolled	250.4	1/1/1900
Depersonalization syndrome	300.5	1/1/1900

Permanent Problems

Diagnosis	ICD-9 Code	Date Diagnosed
Neurasthenia	300.4	1/1/1900
Hysteria, unspecified	300.1	1/1/1900
Diabetes with ketoacidosis type II [noninsulin dependent type] [NIDDM type] [adult-onset type] or unspecified type, not stated as uncontrolled	250.1	3/20/2001

Allergies

Substance	Reaction	Date
Latex	Rash	3/10/1996
Sulfa Drug	fever	1/1/1900

Encounters

Service Date	Diagnosis	Physician	Place Of Service	ClaimID
2/20/2001	250 - Diabetes mellitus without mention of complication	Coolidge, Christopher, MD	Office	12345
3/19/2001	480.8 - Viral pneumonia, unspecified	Coolidge, Christopher, MD	Outpatient Hospital	456789
3/19/2001	480.9 - Pneumococcal pneumonia [Streptococcus pneumoniae pneumonia]	Coolidge, Christopher, MD	Outpatient Hospital	456789
3/19/2001	410.61 - True posterior wall infarction subsequent episode of care	Coolidge, Christopher, MD	Outpatient Hospital	456789

Procedures

Procedure	Code	Date
Sample Procedure	170	2/5/2000
Sample Procedure	120	3/20/2001

Health Screens

Screen	Last Check	Next Check
Routine Physical	3/12/2000	3/12/2001 OVERDUE
Flu Vaccine	3/12/2001	3/12/2001 OVERDUE

Immunizations

Immunization	Immunization Date	Date Due
Tetanus, Pertussis, Diphtheria	5/5/1995	5/5/2005

Prescriptions/ Meds

Medication	Date Ordered	Date Filled
Albuterol - 2 puffs as needed	2/18/2001	2/18/2001
Glucophage - Take 2x daily	12/12/2000	12/12/2000

Advanced Directives

Directive	Location	Special Instructions	Date Executed
Living Will	Office Chart	Full resuscitation	3/20/1998

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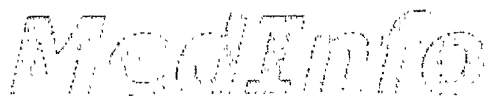
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